#### FORM D

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

SEC Wait OMB APPROVAL

Wait Process OMB Number:

Section Expires:

Estimated average burden

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### FORM D

# NOTICE OF SALE OF SECURITIES Was PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

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Name of Offering ( check if this is an amendment and nam	e nas changed, and indicate change.)	
Endurance Capital Investors II, L.P.	1 505 T Put- 500 T Section 4(6) T H (	
Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Ru	ile 505 El Rule 506 Ll Section 4(6) Ll OLC	76. — Firm 1144 DM 1144 BK 440 MCH 1161 H140 M 117 [11]
Type of Filing: □ New Filing ☑ Amendment	DAGO ANALYTINI CARRON DATA	
	BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer		09002113
Name of Issuer (☐ check if this is an amendment and name	has changed, and indicate change.)	
Endurance Capital Investors II, L.P. (the "Issuer")		
Address of Executive Offices	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
405 Lexington Avenue, 26th Floor, New York, New York	(212) 956-2234	
Address of Principal Business Operations	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
(if different from Executive Offices)		
Brief Description of Business	PROCESSED &	
Investments in public and private financial institutions	V	b
Type of Business Organization	FEB 0 6 2009	
☐ corporation	rship, already formed	please specify):
☐ business trust ☐ limited partne	rship, to be the WSON REUTERS	
	Month Year	•
	0 9 0 8 ☑ Actual □	Estimated
Actual or Estimated Date of Incorporation or Organization:	0 9 0 8 ☑ Actual □	Listinated
Jurisdiction of Incorporation or Organization:	(Enter two-letter U.S. Postal Service a	abbreviation for State:
	CN for Canada; FN for other foreign	jurisdiction)
GENERAL INSTRUCTIONS		
Federal:		
Who Must File: All issuers making an offering of securities	in reliance on an exemption under Regulation	D or Section 4(6), 17 CFR 230.501 et seq. or 15
U.S.C. 77d(6)		
When To File: A notice must be filed no later than 15 days a	after the first sale of securities in the offering.	A notice is deemed filed with the U.S. Securitie
and Exchange Commission (SEC) on the earlier of the date i	t is received by the SEC at the address given to	below or, if received at that address after the date
on which it is due, on the date it was mailed by United States		540
Where To File: U.S. Securities and Exchange Commission, Copies Required: Five (5) copies of this notice must be filed	with the SEC one of which must be manual	ly signed. Any conies not manually signed must
be photocopies of the manually signed copy or bear typed or	printed signatures.	
Information Required: A new filing must contain all inform changes thereto, the information requested in Part C, and any Appendix need not be filed with the SEC.	ation requested. Amendments need only report y material changes from the information previous	ort the name of the issuer and offering, any ously supplied in Parts A and B. Part E and the

Filing Fee: There is no filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA
2. Enter the information requested for the following:
<ul> <li>Each promoter of the issuer, if the issuer has been organized within the past five years;</li> </ul>
• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
<ul> <li>Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and</li> </ul>
Each general and managing partner of partnership issuers.
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☒ General and/or Managing Partner
Full Name (Last name first, if individual)
Endurance Partners II, LLC
Business or Residence Address (Number and Street, City, State, Zip Code)
405 Lexington Avenue, 26th Floor, New York, New York 10174
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☒ Executive Officer ☐ Director ☐ General and/or Managing Partner
Full Name (Last name first, if individual).
Edwin H. Yeo, III
Eusiness or Residence Address (Number and Street, City, State, Zip Code)
405 Lexington Avenue, 26th Floor, New York, New York 10174
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner
Full Name (Last name first, if individual)
FrontPoint Financial Services Fund, L.P.
Business or Residence Address (Number and Street, City, State, Zip Code)
Two Greenwich Plaza, Greenwich Connecticut, 06830
Check Box(es) that Apply: $\square$ Promoter $\boxtimes$ Beneficial Owner $\square$ Executive Officer $\square$ Director $\square$ General and/or Managing Partner
Full Name (Last name first, if individual)
Federal Insurance Company
Business or Residence Address (Number and Street, City, State, Zip Code)
15 Mountain View Road +2W, Warren, New Jersey 07059
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner
Full Name (Last name first, if individual)
Morgan Stanley SCRSIC Strategic Partnership Fund LP
Business or Residence Address (Number and Street, City, State, Zip Code)
One Tower Bridge, 100 Front Street, Suite 1100, West Conshohocken, Pennsylvania 19428-2881
Check Box(es) that Apply:
Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

Business or Residence Address (Number and Street, City, State, Zip Code)

Check Box(cs) that Apply:

Full Name (Last name first, if individual)

☐ Promoter

☐ Beneficial Owner

☐ Executive Officer

☐ Director

☐ General and/or Managing Partner

					B. 18	FORMAT	TION ABO	OUT OFF	ERING					
<u></u>							<del>_</del>						Yes	No
1.	Has the	issuer sold	l. or does th	ne issuer in	tend to sel	l, to non-ac	credited ir	vestors in	this offerir	ıg?	,,,		🗆	$\boxtimes$
,,						ndix, Colu								
2.	What is the minimum investment that will be accepted from any individual?*(commitments of lesser amounts may be accepted at the discretion of the general partner)							\$ 10,00	0,000*					
	accepted	d at the di	scretion o	f the gener	al partne	r)			.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	•••••••				Ma
													Yes	No
3.	Does the	offering p	permit join	t ownership	of a sing	le unit?							🗵	
4.	Enter the	e informati	ion request	ed for each	person w	ho has beer in connect	or will be ion with sa	e paid or gi	ven, direct rities in th	ly or indire e offering.	etly, any c If a person	commission n to be liste	or d	
	ic an acc	ociated no	reon or age	ent of a bro	ker or deal	er registere	d with the	: SEC and/o	or with a st	ate or state	s, list the i	name of the		
	broker o	r dealer. I	If more that	n five (5) p	ersons to b	e listed arc	e associate	d persons o	of such a bi	oker or ac	aier, you n	nay set forth	ı	
Full Name					Olliy.									
	c (Last na	inie mst, i	1 marviada	•,										
N/A Dual-man	an Daoida	maa Addea	ec (Numbe	r and Stree	t City St	ate, Zip Co	de)							
Business	or Reside	nce Addre	ess (inumbe	and Succ	i, City, 30	ite, zip co	uc)							
Name of A	Associate	d Broker o	or Dealer		<u>-</u>						<u> </u>			
States in V	Which Pe	erson Liste	d Has Solid	cited or Int	ends to So	licit Purcha	sers	<u> </u>						
												🗆 A	II States	
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	[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]	
	-	[SC]	[SD]	TNI	[TX]	[עדן	[VT]	[VA]	[WA]	(WVI	[WI]	[WY]	[PR]	
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Full Name	e (Last na	ame tirst, t	if individua	u <i>j</i>										
Business	or Reside	ence Addre	ess (Numbe	er and Stree	et, City, St	ate, Zip Co	de)							
									<del></del>	<del></del>				
Name of i	Associate	ed Broker	or Dealer											_
States in '	Which Pe	erson Liste	d Has Soli	cited or Int	ends to So	licit Purcha	isers					<u> </u>	·	
													II States	
•	[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	
	[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]	
	[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH}	{OK]	[OR]	[PA]	
	[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	
Full Nam			if individu											-
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Business	or Resid	ence Addre	ess (Numb	er and Stre	et, City, St	ate, Zip Co	ode)							
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(Cne	ECK Au	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	(HI)	[ID]	
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	(IL) (MT)	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]	
	(RI)	[SC]	[SD]	[TN]	[TX]	(TUJ)	[TV]	[VA]	[WA]	[WV]	(WI)	[WY]	[PR]	

(Use blank sheet, or copy and use additional copies of this sheet, if necessary.)

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold.  Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box  and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
	Type of Security		aggregate Tering Price		Amount Already Sold
	Debt	<u>s</u>		<u>s</u>	-0-
	Equity	S	-0-	S	-0-
	□ Common □ Preferred				
	Convertible Securities (including warrants)	<u>s</u>	-0-	<u>s</u>	-0-
	Partnership Interests	<u>s</u>	-0-	S	-0-
	Other (Specify) Limited Partnership Interests	\$1,00	000,000,00	\$	80,000,000
	Total			- s	80,000,000
	Answer also in Appendix, Column 3, if filing under ULOE.				
2.	Enter the number of accredited and non-accredited investors, who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				
			Number nvestors		Aggregate Dollar Amount of Purchases
	Accredited Investors		4	<u>s</u>	80,000,000
	Non-accredited Investors		-0-	<u>s</u> _	-0-
	Total (for filings under Rule 504 only)		-0-	S.	-0-
	Answer also in Appendix, Column 4, if filing under ULOE.				
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1.				
	Type of offering		Type of Security		Dollar Amount Sold
	Rule 505			\$	3010
	Regulation A			<u>-</u>	
	Rules 504		<del></del>	٤	· <del>······························</del>
	Total			3	
1.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			<u>\$</u>	
	Transfer Agent's Fees		☑	<u>\$</u>	-0-
	Printing and Engraving Costs				25,000
	Legal Fees				750,000
	Accounting Fees				50,000
	Engineering Fees				-0-
	Sales Commissions (specify finders' fees separately)				-0-
	Other Expenses (identify) postage, travel, filing fees, miscellaneous fees				175,000
	- mile and free martin the free transfer market transfer	• • • • • • • • • •	لىكا ا	9	1/0,000

Total ......

1,000,000

issuer." 5.	Indicate below the amount of the adj of the purposes shown. If the amount the left of the estimate. The total of set forth in response to Part C - Ques	)						
					ayments to Officers, Directors, & Affiliates		F	ayments to Others
	Salaries and fees	🗵	\$	-0-	×	<u>\$</u>	-0	
	Purchase of real estate			<u>\$</u>	-0-	X	<u>\$</u>	-0-
	Purchase, rental or leasing and instal	llation of machinery and equipment	X	<u>\$</u>	-0-	X	<u>\$</u>	-0-
	Construction or leasing of plant build	dings and facilities	⊠	<u>s</u>	-0-	X	<u>\$</u>	-0
	Acquisition of other businesses (inclused in exchange for the assets or se		<u>\$</u>	-0-	×	<u>\$</u>	-0	
	Repayment of indebtedness		⊠	<u>s</u>	-0-	×	<u>s</u>	-0
	Working capital	⊠	<u>\$</u>	-0-	X	<u>\$ 99</u>	9,000,000	
	Other (specify):	🗵	<u>\$</u>		×	<u>s</u>	-0-	
	Column Totals	×	<u>s</u>		×	<u>\$ 99</u>	9,000,000	
	Total Payments Listed (column total			<b>⊠</b> \$ 999,0	00,00	<u>)0,000</u>		
		D. FEDERAL SIGNATURE						
onstitu	tes an undertaking by the issuer to furn	ned by the undersigned duly authorized person. If this notice is hish to the U.S. Securities and Exchange Commission, upon writ resuant to paragraph (b)(2) of Rule 502.						
suer (I	Print of Type)	Signafue Dat	e					
Indura	nce Capital Investors II, L.P.	\\/\\\/	uary 1	3, 20	9			
lame o	f Signer (Print or Type)	Title of Signer (Print or Type)						
unite O	II. Yeo, III	Managing Member of Endurance Partners II, LLC, t	he gen	eral i	partner of th	e Iss	uer	

ATTENTION
Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

END